24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
Americans United for Values				
	C C00604496			
Check if 24-hour report 48-hour report New report Amends report filed on				
Full Name of Payee	Date of Public Distribution/Dissemination			
GRP Buying	M M / D D / Y Y Y Y Y			
Mailing Address 3136 Kingsdale Center #136	05 11 2017 Amount			
	0.00100			
City State Zip Code Upper Arlington OH 43221	35364.00 Transaction ID : SE.4208			
- Spranning St.	Date of Disbursement or Obligation			
Purpose of Expenditure TV advertising (placement) Category/ Type 004	05 11 7 2017			
Name of Federal Candidate Support Office	e Sought: House District: 05			
Norman, Ralph, W., , Jr.	President Senate State: SC			
Calendar Year-To-Date Per Election for Office Sought Disbut	rsement For: Primary General ✓ Other (specify) ► Runoff			
Full Name of Payee GRP Buying	Date of Public Distribution/Dissemination			
Mailing Address	05 11 2017			
Mailing Address 3136 Kingsdale Center #136	Amount			
City State Zip Code	38136.00			
Upper Arlington OH 43221	Transaction ID : SE.4210 Date of Disbursement or Obligation			
Purpose of Expenditure Category/ Category/	M M / D D / Y Y Y Y			
Radio advertising (placement) Radio advertising (placement) Type 004	05 11 2017			
Name of Federal Candidate Support Office	e Sought: 🗶 House District:05			
Norman, Ralph, W., , Jr.	President Senate State: SC			
Calendar Year-To-Date Per Election for Office Sought Disbut 2017	ursement For: Primary General ★ Other (specify) ► Runoff			
(a) SUBTOTAL of Itemized Independent Expenditures	73500.00			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.				
24.0	5 11 2017			
Signature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	INT EXI END	ITORES		PAGE 2 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Americans United for Values				C C00604496
Check if 24-hour report 48-hour report	X New rep	ort Amends repo		T = M / D = D / Y = Y = Y = Y
Full Name of Payee			Date	of Public Distribution/Dissemination
GRP Buying				05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3136 Kingsdale Center #136			Amou	ınt
City	State	Zip Code		5000.00
Upper Arlington	ОН	43221		saction ID : SE.4212 of Disbursement or Obligation
Purpose of Expenditure TV advertising (production)		Category/ Type 004		05 / 11 / 2017
Name of Federal Candidate		Support	Office Sough	nt: X House District: 05
Norman, Ralph, W., , Jr.		X Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	· · · · · ·	93684.60	Disbursemer 2017	nt For:
Full Name of Payee			Date	of Public Distribution/Dissemination
GRP Buying			Г	05 11 2017
Mailing Address 3136 Kingsdale Center #136			Amou	unt
City	State	Zip Code	— I	1500.00
Upper Arlington	ОН	43221		action ID : SE.4213 of Disbursement or Obligation
Purpose of Expenditure Radio advertising (production)		Category/ Type 004		05 11 2017
Name of Federal Candidate		Support	Office Sough	nt: K House District: 05
Norman, Ralph, W., , Jr.		X Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	7 7	95184.60	Disbursemer 2017	nt For:
(a) SUBTOTAL of Itemized Independent Expendit	ures			6500.00
(b) SUBTOTAL of Uniternized Independent Exper	dituros		_	
(b) SOBIOTAL OF Officernized independent Exper	iditures		· •	7 7 7
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Kinnett, Brian, , , Signature	[Electron	nically Filed] Date	9 05	11 2017
Signature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48				
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
Americans United for Values	C C00604496				
Check if X 24-hour report 48-hour report New report Amends report filed	i on Mam / Dad / Yayayay				
Full Name of Payee	Date of Public Distribution/Dissemination				
Majority Strategies	05 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 12854 Kenan Drive, Suite 145	Amount				
City State Zip Code	7460.26				
Jacksonville FL 32258	Transaction ID : SE.4199 Date of Disbursement or Obligation				
Purpose of Expenditure Direct mail Category/ Type 004	05 10 2017				
Name of Federal Candidate Support Offic	e Sought:				
Pope, Tommy, , ,	President Senate State: SC				
Calendar Year-To-Date Per Election for Office Sought Disb. 2017	ursement For: Primary General ✓ Other (specify) ► Runoff				
Full Name of Payee	Date of Public Distribution/Dissemination				
	M = M / D = D / Y = Y = Y				
Mailing Address					
	Amount				
City State Zip Code					
	Date of Disbursement or Obligation				
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y				
Name of Federal Candidate Support Office	e Sought: House District:				
Oppose	President Senate State:				
Galorida Tod To Bato	ursement For: Primary General				
Per Election for Office Sought	Other (specify) ▶				
(a) SUBTOTAL of Itemized Independent Expenditures	7460.26				
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures	87460.26				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Kinnett, Brian, , , [Electronically Filed] Date	D5 11 2017				
Oignature					